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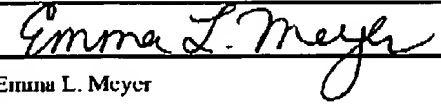
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09,526,754	
	Filing Date	March 16, 2000	
	First Named Inventor	Brett A. Hurt	
	Art Unit	3622	
	Examiner Name	DURAN, Arthur D.	
Total Number of Pages in This Submission	4	Attorney Docket Number	COREMET-001 (1092-0001)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <p align="center">CUSTOMER NO.: 60533</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Toler Schaffer, L.L.P.		
Signature			
Printed name	Jeffrey G. Toler		
Date	4-3-2006	Reg. No.	38,342

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Emma L. Meyer	Date	April 3, 2006

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34436 7590 01/27/2005

TOLER & LARSON & ABEL L.L.P.
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AUSTIN, TX 78746

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Emma L. Meyer (Depositor's name)
Emma L. Meyer (Signature)
April 3, 2006 (Date)

04/06/2006 TBESHAH2 00000002 502469 09526754

01 FC:1501 1400.00 DA
02 FC:8881 9.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/326,754	03/16/2000	Brett A. Hunt	COREMBT-001	1157

TITLE OF INVENTION: ELECTRONIC COMMERCE PERSONALIZED CONTENT DELIVERY SYSTEM AND METHOD OF OPERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	04/27/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
DURAN, ARTHUR D	3622	705-014000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Toler Schaffer, LLP

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Coremetrics, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

2755 Campus Drive, Suite 235
San Mateo, CA 94403Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card, Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2409 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Jeffrey G. Toler

Date

4-3-2006

Typed or printed name Jeffrey G. Toler

Registration No.

38,342

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CENTRAL FAX CENTER****APR - 3 2006****FACSIMILE COVER SHEET****DATE:** April 3, 2006**TO:** Examiner DURAN, Arthur D. **FAX NO.:** 571-273-8300
USPTO GPAU 3622**FROM:** Jeffrey G. Toler
Reg. No.: 38,342**RE U.S. App. No.:** 09,526,754, filed March 16, 2000**Applicant(s):** Brett A. Hurt, et al.**Atty Dkt No.:** COREMET-001 (1092-0001)**Title:** ELECTRONIC COMMERCE PERSONALIZED CONTENT
DELIVERY SYSTEM AND METHOD OF OPERATION**NO. OF PAGES (including Cover Sheet):** 4**MESSAGE:**

Attached please find:

- ☒ Transmittal Form (1 pg)
☒ Issue Fee Transmittal (2 pgs) (in duplicate)

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